

CANCER REGISTRIES: A FOUNDATION FOR COMPREHENSIVE CANCER CONTROL

WHAT IS THE PUBLIC HEALTH PROBLEM?

- Cancer is the second leading cause of death among Americans.
- In 2003, an estimated 556,500 Americans will die of cancer more than 1,500 people per day.
- Approximately 1.3 million new cases of cancer will be diagnosed in 2003. This estimate does not include *in situ* (pre-invasive) cancer or more than 1 million cases of nonmelanoma skin cancer that also will be diagnosed this year.
- The overall estimated cost for cancer in the United States in 2002 was \$171.6 billion, including health care expenditures and lost productivity from illness and death.

WHAT HAS CDC ACCOMPLISHED?

CDC's National Program of Cancer Registries (NPCR) is a fundamental component of CDC's state-based cancer control strategy. CDC supports registries in 45 states, the District of Columbia, and three territories, representing 96% of the United States population. Data collected by cancer registries enable public health professionals to better understand and address the cancer burden. Registry data are used to determine cancer patterns among various populations; monitor cancer trends over time; guide planning and evaluation of cancer control programs, such as those focused on preventing risk behaviors for cancer (e.g., tobacco use and sun exposure) or deciding when and where cancer screening efforts should be enhanced; and advance clinical, epidemiologic, and health services research. Data collected by registries are also essential for monitoring the treatment provided to those with a diagnosis of cancer. Forty-five programs receive support to enhance existing registries, and four programs receive support to develop and implement new registries. CDC also provides training in data collection, analysis, interpretation and quality assurance for completeness, timeliness and quality. CDC has implemented the NPCR-Cancer Surveillance System to improve the quality and usefulness of state cancer registries' data.

Example of program in action: From 1988 through 1999, the California Cancer Registry studied the incidence of cancer among members of the United Farmworkers of America (UFW), a largely Hispanic farmworker labor union. Results showed that the risk of leukemia, stomach, cervical, and uterine cancers was elevated in California farmworkers. UFW members also experienced later stage of disease at diagnosis than other California Hispanics for most major cancer sites, but not for breast cancer. Additional research into the potential causes of this increased risk for certain cancers is planned, including a study of farmworkers' exposure to pesticides.

WHAT ARE THE NEXT STEPS?

CDC's goal is to improve states' ability to report on cancer trends, assess program impact, identify cancer clusters and respond to public inquiries and reports of suspected increases in cancer occurrence. In fall 2002, the CDC and the National Cancer Institute, in collaboration with the North American Association of Central Cancer Registries (NAACCR), jointly produced a set of official federal cancer incidence statistics from each state having high-quality registry data. The report, *U.S. Cancer Statistics: 1999 Incidence*, includes cancer data from 37 states, 6 metropolitan areas, and the District of Columbia, representing about 78% of the U.S. population. Plans are to produce this report on an annual basis. Availability of regional-and national-level data will facilitate research on rare cancers, cancer among children and racial and ethnic minority populations, and occupation-related cancer, as well as special studies focusing on patterns of care for cancer patients.

For additional information on this and other CDC programs, visit www.cdc.gov/programs.

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